Testimony of Marcia Zello
Sterile Processing Manager
Hartford Healthcare

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HB 5913 AN ACT CONCERNING PERSONS WHO DECONTAMINATE REUSABLE MEDICAL INSTRUMENTS AND DEVICES

Good afternoon Senator Gerratana, Representative Ritter and distinguished members of the Joint Public Health Committee. My name is Marcia Zello; I am Sterile Processing Manager at Hartford Healthcare.

I appear before you this afternoon to speak in support of HB 5913 An Act Concerning Persons Who Decontaminate Medical Instruments and Devices.

The central service profession continues to evolve at a rapid pace with new surgical items being introduced regularly. The processing of robotics, endoscopes, joint replacement, and related instruments and equipment requires an advanced technical knowledge that only certification will provide.

The central service department is often plagued by a number of resource shortcomings - including limited staff who are expected to keep up with the harried pace of healthcare and the increasing demands of their many customers, such as the surgical services department. For these reasons, it is essential that central service staff have the knowledge, skills and training to provide consistent, reliable, and quality-focused service. Certification makes central service professionals privy to the latest technology, industry standards and processing practices.

Central service professionals are responsible for first-line processes to prevent surgical site infections. Improperly sterilized instruments used in surgical procedures can introduce bacteria into a patient, which sets up the risk for infection. Certified central service technicians are educated in microbiology, cleaning and decontamination, infection control, tools for cleaning, sterile packing, surgical instrumentation, high and low temperature sterilization, medical terminology, and anatomy and physiology.

Most people think when an item goes through a sterilizer and the tests for the sterilizer show it was "sterilized" properly, then the item is sterile. This does not mean the device is sterile. It means the process by which it was put through was capable for sterilization to have occurred, not that it did occur. This is where proper technique and knowledge is critical because failures are often unnoticed through a sterilization cycle. There is no way to see an error. The printout on
the sterilizer will say it was sterilized, the biological will say it passed, but if that technician put it two inches too close to the next, you have deviated from one out of hundreds of principles necessary to sterilize it properly, and no one will have known.

I would be pleased to answer any questions you might have. Thank you.